Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:1 of 44

Provide the Hospital Owner and Year of Report per Section 130061(e)

Facility Number:	10831	
Facility Name:	Goleta \	Valley Cottage Hospital
Address:	351 Sou	uth Patterson Avenue
City:	Santa B	arbara
Hospital Owner/Lic	ensee:	Cottage Health System; Sole Corporate Member
Year of Rep	oorting:	2010
Contact 1 e-mail Ad	ddress:	
Contact 2 e-mail Ad	ddress:	
Contact 3 e-mail Ad	ldress::	
Name of Sub	omitter:	Brooks Larson
Submission	n Date:	1/18/2011 9:39:14 AM

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:2 of 44

For buildings which are planned for retrofit or replacement the report shall identify: Whether the hospital owner intends to retrofit or replace the building to SPC 2 or SPC 5 per section 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for retrofit or replacement of the bulding that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
01	Hospital and Addition	351 South Patterson Avenue	Remove	N/A	01/01/2013	10/14/2013
02	Maintenance Shop / Oxygen Storage	351 South Patterson Avenue	Remove	N/A	01/01/2013	10/14/2013
[]	 	t	1 [[s./s		,
04	Mechanical Yard	351 South Patterson Avenue	Remove	N/A	01/01/2013	10/14/2013

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara

nta Barbara Page:3 of 44

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:4 of 44

Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: 01	Buildi	ng Name: Hospital and Addition		
Type of Service Prov	<u>rided</u>			
X Nursing	Inpatient Beds	46 Inpatient 3313 Days	X Surgical	Obstetrical Recovery
X IntensiveCare	Inpatient Beds	11 Inpatient Days 784	X Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	X Clinical Lab	X Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	X Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	10 Inpatient Days 0	X Pharmaceutical X Dietetic	X Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	55 Inpatient Days 11272	X Support Services Obstetrical	X Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	X Central Plant

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:5 of 44

Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: 02 Building Name: Maintenance Shop / Oxygen Storage						
Type of Service Prov	<u>rided</u>					
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery		
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby		
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency		
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine		
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy		
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis		
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0 Total Beds this	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery		
		Building	o o o a i o o i o o i o o o o o o o o o	χ Central Plant		

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:6 of 44

Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: 04 Building Name: Mechanical Yard							
Type of Service Provided							
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery			
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency			
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine			
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis			
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0 Total Beds this 0	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery			
		Building	Ocsaicail/Deliv	X Central Plant			

2010

10831

Goleta Valley Cottage Hospital

Santa Barbara

Page:7 of 44

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:	01	Building Name:	Hospital and Addition		
Medical / Surgical (Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 46 Bed	Inpatient 3313 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse I	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 10 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 55 Bed	Inpatient 1127 Days 2
Pediatric		intensive Care Nursery	e Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	ent
Inpatient 11 Bed	Inpatient 784 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	122	122

2010

10831

Goleta Valley Cottage Hospital

Santa Barbara

Page:8 of 44

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: 02	2 Buildir	ng Name: Mai	intenance Shop / Oxygen St	orage	
Medical / Surgical (Incl	lude GYN)	Acute Respirator	y Care	Acute Psychiatric	
Inpatient 0 Inp	patient 0 ys	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse New	/born / GYN)	Burn		Skilled Nursing	
Inpatient 0 Inp	patient 0 ys	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Ne Nursery	ewborn	Intermediate Card	
Inpatient 0 Inpatient Day		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	nent
Inpatient 0 Inpa		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Inpa		Inpatient 0 Bed	Inpatient 0 Days	0	0

2010

10831

Goleta Valley Cottage Hospital

Santa Barbara

Page:9 of 44

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:	04	Building Name:	Mechanical Yard		
Medical / Surgical (Include GYN)	Acute Respira	itory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse l	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	0	0

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:10 of 44

For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number	Building Name	Building to be Removed
01	Hospital and Addition	X
02	Maintenance Shop / Oxygen Storage	X
03	Emergency Power System Building	X
04	Mechanical Yard	x

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:11 of 44

List ALL proposed new buildings to be constructd at this or another site.

Building Number	Building Name	New Site	
N_1	52 Bed Replacement Hospital		

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:12 of 44

Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D)					
Building 01 Number:	Building Name:	Hospital and	Addition	Year of Information:	2008
				Information Current As Of:	01/17/2011
Type of Services Provided					
X Nursing	Inpatient Beds	46	X Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy
X IntensiveCare	Inpatient Beds	11	X Anesthesia		
Pediatric/Adol	Inpatient	0	X Clinical Lab	Obstetrical Recovery	Renal Dialysis
escent Psychiatric Nursing	Beds Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery
X Obstetrical Ante/Postprtum	Inpatient Beds	10	X Pharmaceutical	X Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	X Dietetic	X Nuclear Medicine	X Support Services
X Skilled Nursing	Inpatient Beds Total Beds this	55	X Administration		
	Building				

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:13 of 44

Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D)					
Building 01 Number:	Building Name:	Hospital and	Addition	Year of Information:	2009
				Information Current As Of:	01/17/2011
Type of Services Provided					
X Nursing	Inpatient Beds	46	X Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy
X IntensiveCare	Inpatient Beds	11	X Anesthesia		
Pediatric/Adol	Inpatient	0	X Clinical Lab	Obstetrical Recovery	Renal Dialysis
escent Psychiatric Nursing	Beds Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery
X Obstetrical Ante/Postprtum	Inpatient Beds	10	X Pharmaceutical	X Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	X Dietetic	X Nuclear Medicine	X Support Services
X Skilled Nursing	Inpatient Beds Total Beds this	55	X Administration		
	Building				

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:14 of 44

Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D)							
Building 01 Number:	Building Name:	Hospital and	d Addition	Year of Information:	2010		
				Information Current As Of:	01/17/2011		
Type of Services Provided							
X Nursing	Inpatient Beds	46	X Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy		
X IntensiveCare	Inpatient Beds	11	X Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0	X Clinical Lab	Obstetrical Recovery	Renal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery		
X Obstetrical Ante/Postprtum	Inpatient Beds	10	X Pharmaceutical	X Emergency	X Central Plant		
Intermediate Care	Inpatient Beds	0	X Dietetic	X Nuclear Medicine	X Support Services		
X Skilled Nursing	Inpatient Beds Total Beds this	55	X Administration				
	Building	122					

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:15 of 44 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Maintenance Shop / Oxygen Storage 2008 02 Year of Building Building Information: Number: Name: 01/17/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

Report real. 2010	10631	Boleta Valley Cot	lage nospilai	Santa	DaiDaia ————————————————————————————————		
Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D)							
Building 02 Number:	Building Name:	Maintenand	ce Shop / Oxygen Storage		Year of Information:	_ _	009
Type of Services Provided		ı		Of:			
Nursing	Inpatient Beds	0	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab		Obstetrical Recovery		Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical		Emergency	X	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic		Nuclear Medicine	X	Support Services
Skilled Nursing	Inpatient Beds Total Beds this	0 0	Administration				
	Building						

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:17 of 44 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Maintenance Shop / Oxygen Storage 2010 02 Year of Building Building Information: Number: Name: 01/17/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:18 of 44 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Emergency Power System Building 2008 03 Year of Building Building Information: Number: Name: 01/17/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Obstetrical Inpatient 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:19 of 44 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Emergency Power System Building 2009 03 Year of Building Building Information: Number: Name: 01/17/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Obstetrical Inpatient 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

Report Year: 20	10831	Goleta Valley Cot	tage Hospital	Santa Barbara	Page:20 of 44		
Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D)							
Building 03 Number:	Building Name:	Emergency	y Power System Building	Year of Information:	2010		
				Information Current As Of:	01/17/2011		
Type of Services Provided		,	•				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveCare	Inpatient Beds	0	Anesthesia				
Pediatric/Adol	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtu	Inpatient m Beds	0	Pharmaceutical	Emergency	X Central Plant		
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services		
Skilled Nursin	g Inpatient Beds	0	Administration				
	Total Beds thi Building	is 0	ı				

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:21 of 44 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Mechanical Yard 2008 04 Year of Building Building Information: Number: Name: 01/17/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/18/2011 **Submission Date:** 01/18/2011 **Print Date:** 1/19/2011 8:38 AM

Building

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:22 of 44 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Mechanical Yard 2009 04 Year of Building Building Information: Number: Name: 01/17/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/18/2011 **Submission Date:** 01/18/2011 **Print Date:** 1/19/2011 8:38 AM

Building

Report Year:	2010	10831	Goleta Valley Cottage Hospital		Santa Barbara	Page:23 of 44
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Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D)						
Building 04 Number:	Building Name:	Mechanica	l Yard	Year of Information:	2010	
				Information Current As Of:	01/17/2011	
Type of Services Provided						
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
IntensiveCare	Inpatient Beds	0	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis	
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant	
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services	
Skilled Nursing	Inpatient Beds Total Beds this Building	0	Administration			

Report Year: 2010 10831 Goleta Valley Cottage Hospital

Santa Barbara

Page:24 of 44

Report whether the general acute care services and beds will be relocated to a new or retrofittrd building and any corresponding building sites or project numbers per Section 130061(c)(2)(E)

Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building?							
Nursing Relocated to new building							
New Building Bed Count RetroFitted Building Bed Co	ount Other SPC2-SPC5 Building Bed Count						
N_1-52 Bed Replacement Hospital 44							
Facility Project Sub Scope	Date Plan Approved Proj. Start Proj. Completed						
Status Number Number Num	in Date Date Date						
— Number Num	III Date Date Date						
10831 HS070843 0 52 BED REPLACEMENT HOSPITAL	05/29/2007 11/02/2010 11/23/2010 10/14/2013 OPEN						
Building Name: Hospital and Addition Number:							
Will general acutr care services and beds will be relocated to a new or retrofittrd l	ouilding?						
Intensive Care Relocated to new building							
New Building Bed Count RetroFitted Building Bed Co	ount Other SPC2-SPC5 Building Bed Count						
N_1-52 Bed Replacement Hospital 8							
Facility Project Sub Scope	Date Plan Approved Proj. Start Proj. Completed						
Status Number Num	in Date Date Date						
<u> </u>							
10831 HS070843 0 52 BED REPLACEMENT HOSPITAL	05/29/2007 11/02/2010 11/23/2010 10/14/2013 OPEN						

Report Year: 2010 10831 Goleta Valley Cottage Hospital	Santa Barbara F	Page:25 of 44					
Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Obstetrical Ante Postprtum Removed from hospital services							
Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Skilled Nursing Removed from hospital services							
Building Number: Building Name: Hospital and Addition Will general acutr care services and beds will be relocated to a new or retrofittrd building?							
Surgical Relocated to new building							
New Building Bed Count RetroFitted Building Bed Count Other SPC2-SPC5 Building Bed Count N_1-52 Bed Replacement Hospital							
Facility Project Sub Scope Date Pla Status Number Number Num in	an Approved Proj. Start Proj. Comp Date Date Date						
10831 HS070843 0 52 BED REPLACEMENT HOSPITAL 05/29/20	07 11/02/2010 11/23/2010 10/14,	/2013 OPEN					

Report Year: 10831 Goleta Valley Cottage Hospital Santa Barbara Page:26 of 44 2010 Hospital and Addition **Building Name:** 01 Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Relocated to new building Anesthesia **New Building Bed Count** RetroFitted Building **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843 10831 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/02/2010 11/23/2010 10/14/2013 OPEN 01 **Building Name:** Hospital and Addition Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? ClinicalLab Relocated to new building **RetroFitted Building New Building** Bed Count **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date HS070843 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/23/2010 10831 11/02/2010 10/14/2013 OPEN

Report Year: 10831 Goleta Valley Cottage Hospital Santa Barbara Page:27 of 44 2010 Hospital and Addition **Building Name:** 01 Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Radiological/Imaging Relocated to new building **New Building Bed Count** RetroFitted Building **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843 10831 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/02/2010 11/23/2010 10/14/2013 OPEN 01 **Building Name:** Hospital and Addition Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Relocated to new building Pharmaceutical **RetroFitted Building New Building** Bed Count **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date_ Date Date HS070843 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/23/2010 10831 11/02/2010 10/14/2013 OPEN

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:28 of 44 Hospital and Addition **Building Name:** 01 Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Relocated to new building Dietetic **New Building Bed Count** RetroFitted Building **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843 10831 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/02/2010 11/23/2010 10/14/2013 OPEN 01 **Building Name:** Hospital and Addition Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Relocated to new building Administration **RetroFitted Building New Building** Bed Count **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date HS070843 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/23/2010 10831 11/02/2010 10/14/2013 OPEN

Report Year: 10831 Goleta Valley Cottage Hospital Santa Barbara Page:29 of 44 2010 Hospital and Addition **Building Name:** 01 Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Relocated to new building Support Services **New Building Bed Count** RetroFitted Building **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843 10831 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/02/2010 11/23/2010 10/14/2013 OPEN 01 **Building Name:** Hospital and Addition Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Relocated to new building Emergency **RetroFitted Building New Building** Bed Count **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date HS070843 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/23/2010 10831 11/02/2010 10/14/2013 OPEN

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:30 of 44 **Building Name:** Hospital and Addition 01 Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Relocated to new building Nuclear Medicine **New Building Bed Count** RetroFitted Building **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Project Sub Date Plan Approved Proj. Completed Facility Scope Proj. Start Status Number Number Num Date in Date Date HS070843 10831 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/02/2010 11/23/2010 10/14/2013 **OPEN** 10831 HS070843 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/02/2010 11/23/2010 10/14/2013 **OPEN Building Name:** 01 Hospital and Addition Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Rehabilitation Relocated to new building Therapy Bed Count **New Building** RetroFitted Building **Bed Count** Other SPC2-SPC5 Building Bed Count N_1-52 Bed Replacement Hospital Project Facility Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num Date Date Date HS070843 11/23/2010 10831 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/02/2010 10/14/2013 OPEN

Report Year: 10831 Goleta Valley Cottage Hospital Santa Barbara Page:31 of 44 2010 Hospital and Addition **Building Name:** 01 Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? OutpatientSurgery Relocated to new building **New Building Bed Count** RetroFitted Building **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843 10831 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/02/2010 11/23/2010 10/14/2013 OPEN 01 **Building Name:** Hospital and Addition Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Relocated to new building CentralPlant **RetroFitted Building New Building** Bed Count **Bed Count** Other SPC2-SPC5 Building **Bed Count** N_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date HS070843 0 52 BED REPLACEMENT HOSPITAL 05/29/2007 11/23/2010 10831 11/02/2010 10/14/2013 OPEN

Report Year: 2010 10831 Goleta Valley Cottage Hospital	Santa Barbara	Page:32 of 44					
Building Name: Hospital and Addition Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building?							
Medical/Surgical (Include GYN) Relocated to new building							
New Building Bed Count RetroFitted Building Bed Count	Other SPC2-SPC5 Building Bed	<u>Count</u>					
N_1-52 Bed Replacement Hospital 44							
Facility Project Sub Scope Date Status	Plan Approved Proj. Start Proj. Cor	npleted					
Number Number in	Date Date Date	ate					
-							
10831 HS070843 0 52 BED REPLACEMENT HOSPITAL 05/29/	2007 11/02/2010 11/23/2010 10/	14/2013 OPEN					
Building Name: Hospital and Addition Number:							
Will general acutr care services and beds will be relocated to a new or retrofittrd building?							
Perinatal (exclude Newborn / GYN))							

Report Year: 2010 10831 Goleta Valley Cottage Hospital	Santa Barbara	Page:33 of 44
Building Number: Hospital and Addition Will general acutr care services and beds will be relocated to a new or retrofittrd building?		
Intensive Care Relocated to new building	٦	
	Other SPC2-SPC5 Building Bed	Count
N_1-52 Bed Replacement Hospital 8 Facility Project Sub Scope Date I Status Number Number Num in 10831 HS070843 0 52 BED REPLACEMENT HOSPITAL 05/29/2	Date Date D	ompleted Date 0/14/2013 OPEN
Building Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Skilled Nursing Removed from hospital services		
Building Name: Maintenance Shop / Oxygen Storage Number: Will general acutr care services and beds will be relocated to a new or retrofittrd building? Support Services N/A		

Report Year:	2010 10831 Goleta	Valley Cottage Hospital	Santa Barbara	Page:34 of 44
Building Number: Will general acu CentralPlant	02 Building Name utr care services and beds will be	e: Maintenance Shop / Oxygen Storage		
Building Number: Will general acu Support Service		e: Emergency Power System Building e relocated to a new or retrofittrd building	?	
Building Number: Will general acu CentralPlant	03 Building Name utr care services and beds will be	e: Emergency Power System Building e relocated to a new or retrofittrd building	?	
Building Number: Will general acu Support Service		e: Mechanical Yard e relocated to a new or retrofittrd building	?	

Report Year:	2010 10831	Goleta Valley Cottage Hospital	Santa Barbara	Page:35 of 44
Building Number: Will general acu		ing Name: Mechanical Yard eds will be relocated to a new or retrofi	iittrd building?	
CentralPlant	N/A			

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:36 of 44

Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	01	Building Name:	Н	ospital and Addition				
Type of Service Provided								
			X	Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	Nursing		X	Anesthesia				
X	IntensiveCare	·				Obstetrical Recovery		Renal Dialysis
П	Pediatric/Ado		X	Clinical Lab			X	Outpatient
L_l escent		X	Radiological/ Imaging	Newborn/ WellBaby			Surgery	
	Psychiatric Nursing		X	Pharmaceutical	X	Emergency	X	Central Plant
	Obstetrical				X	Nuclear	X	Support
Ante/F	Ante/Postprtu	um 🛚 🗵	X	Dietetic	ت	Medicine		Services
	Intermediate Care							
	Cale		X	Administration				
	Skilled Nursin	ıg İ						

Report Year:	2010	10831	Goleta Valley Cottage Hospital	Santa Barbara	Page:37 of 44
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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	02	Building Name:	Maintenance Shop /	Oxygen Storage		
Type of Service	e Provided		_	_		
		L	Surgical	Obstetrical Cesarean/Deliv	Ш	Rehabilitation Therapy
	Nursing		Anesthesia			
	IntensiveCare			Obstetrical Recovery		Renal Dialysis
	Pediatric/Adolescent	, L	Clinical Lab			Outpatient
			Radiological/ Imaging	Newborn/ WellBaby		Surgery
	Psychiatric Nursing		Pharmaceutical	Emergency	Х	Central Plant
	Obstetrical			Nuclear	X	Support
	Ante/Postprtu		Dietetic	Medicine	<u></u>	Services
	Intermediate Care					
	Cuio		Administration			
	Skilled Nursin	ng				

Report Year:	2010	10831	Goleta Valley Cottage Hospital	Santa Barbara	Page:38 of 44
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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

		-				
Building Number:	04	Building Name:	Mechanical Yard			
Type of Servic	e Provided		_	_		
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia			Renal Dialysis
	IntensiveCare	·	Clinical Lab	Obstetrical Recovery		Renai Dialysis
	Pediatric/Ado escent	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Clinical Lab	Newborn/		Outpatient Surgery
	Psychiatric		Radiological/ Imaging	WellBaby		
	Nursing		Pharmaceutical	Emergency	X	Central Plant
	Obstetrical Ante/Postprtu	m [Dietetic	Nuclear Medicine	X	Support Services
	Intermediate Care		Administration			
П	Skilled Nursin	g				

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:39 of 44

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Numbe	Building Number: 01 Building Name: Hospital and Addition							
Configuration .	Replace with new	SPC 5 and N	NPC 4 or NPC 5 build	ing				
Type of Serv	rice Provided							
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy	
X	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis	
	Pediatric/Adol escent	X	Clinical Lab		Recovery			
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery	
	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency	X	Central Plant	
	Intermediate	X	Dietetic					
	Care Skilled Nursing	X	Administration	X	Nuclear Medicine	X	Support Services	

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:40 of 44

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number: 02 Building Name: Maintenance Shop / Oxygen Storage							
Configuration :	Replace with new	SPC 5 and N	NPC 4 or NPC 5 buildin	g			
Type of Servi	ce Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	X	Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:41 of 44

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number:	Building Number: 03 Building Name: Emergency Power System Building							
Configuration:	Replace with new	SPC 5 and N	NPC 4 or NPC 5 buildin	ng				
Type of Service	e Provided							
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
In	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis	
	ediatric/Adol scent		Clinical Lab		Recovery			
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	X	Central Plant	
	termediate		Dietetic					
	are killed Nursing		Administration		Nuclear Medicine	X	Support Services	

Report Year:	2010	10831	Goleta Valley Cottage Hospital	Santa Barbara	Page:42 of 44
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Numb	er: 04	Building Na	me: Mechanical Yard					
Configuration:	Replace with new	SPC 5 and N	NPC 4 or NPC 5 building	J				
Type of Ser	Type of Service Provided							
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis	
	Pediatric/Adol escent		Clinical Lab		Recovery			
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	X	Central Plant	
	Intermediate		Dietetic					
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services	

Report Year: 2010 10831 Goleta Valley Cottage Hospital Santa Barbara Page:43 of 44

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Buildi	ing Number: 03	Buildin	g Name: En	nergency Po	ower System Buildin	ng		
Тур	Type of Service Provided							
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
	IntensiveCare	Inpatient Beds	0		Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					

Report Status: **Data Last Update:** 01/18/2011 **Submission Date:** 01/18/2011 **Print Date:** 1/19/2011 8:38 AM

2010

10831

Goleta Valley Cottage Hospital

Santa Barbara

Page:44 of 44

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number:	03 Build	ling Name: Emerge	gency Power System Bui	lding		
Medical / Surgical (In	clude GYN)	Acute Respiratory C	Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Inpatient 0 Days		
Perinatal (excluse Ne	ewborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Inpatient 0 Days		
Pediatric		intensive Care Newb Nursery	oorn	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / development Disabled		
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Inpatient 0 Days		
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit Total Beds this Building Per Service		
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	0 0		